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(Requestor's Name)	·······
(requestors hame)	
(Address)	
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(City/State/Zip/Phon	e #)
	MAIL
(Business Entity Na	me)
(Document Number)	}
Certified Copies Certificate	s of Status
Special Instructions to Filing Officer:	
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Office Use Or	ily



08/29/23--01030--010 ++155.00



COVER LETTER

TO: New Filing Section **Division of Corporations**

SUBJECT: ____ Belote Consulting LLC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Dave Belote					
	(Contact Person)				
Belote Consulting LLC	2				
· · · · · · · · · · · · · · · ·	(Firm/Company)		_		
139 Ocean View Dr					
	(Address)				
Tavernier FL 33070					
(City, State and Zip Code)	<u> </u>			
dave.belote@gmail.co	m				
E-mail Address: (to b	be used for future annual re	port notifications)			
For further informati	on concerning this ma	tter, please call	÷		
Dave Belote		at (⁷⁰³	8221	1865	
(Name of Conta	act Person)	(Area Cod	e) (Day	ytime Telephone Number)	-
	for the following amou a bank located in the		proces	sed by this office must	be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$ 155.00 Filing Fees and Certificate of Status	☐\$180.00 Filin and Certified Co		\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Add			Stree	t Address:	· · · · · · · · · · · · · · · · · · ·
New Filing S				Filing Section	2023 AUG 29
Division of C				ion of Corporations	
P.O. Box 632				Centre of Tallahassee	
Tallahassee,	FL 32314			N. Monroe Street, Suit	· · ·
			Talla	hassee, FL 32303	$S : \Rightarrow$

ess: 2023 AUG 29 Section Corporations of Tallahassee nroe Street, Suite 810 FL 32303 AH 10: 13 1 1

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Belote Consulting LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a _____ (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of

(Enter state, or if a non-U.S. entity, the name of the country)

April 7, 2010 on

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Belote Consulting LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date:

(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

5. The plan of conversion has been approved in accordance with all applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.



Signed thi	s 23rd	_day of <u>August</u>		_20 <u>23</u> .	
				ed Liability Company:	
Signature Printed Na	of Authoriz me <u>: Howard</u>	ed Representative: _ D. Belote	Ŕ	Title: Managing Partner	
				See below for required signa	ture(s)]
Signature:			FORME	statet	
Printed Na	me: Howard	D. Belote		Title: Managing Partner	
Signatura					
Printed Na	me:	······		_ Title:	
Signature: Printed Na				Title:	
Signature:		<u> </u>			
Printed Na	ime:			_ Title:	
Signature:				_ Title:	
Printed Na	me:			Title:	
Signature:					
Printed Na	me:			Title:	
Signature of If Director	s or Officers General Pa	, Vice Chairman, Dire have not been selecte rtnership or Limited	ed, an Inco	orporator must sign.	
Signature of	of one Gener	al Partner.			
		rtnership or Limited neral Partners.	Liability	<u>Limited Partnership:</u>	
<u>All others</u> Signature of	<u>:</u> of an authori:	zed person.			
Fees:					
Fee Ce	ticles of Cor es for Florid rtified Copy rtificate of S	a Articles of Organiz	zation:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	LANASSEE, FL
					1

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Belote Consulting LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:
139 Ocean View Dr
Tavernier FL 33070

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Howard D. Belote	
Na	ime
139 Ocean View Dr	
Florida street address (F	P.O. Box <u>NOT</u> acceptable)
Tavernier	FL 33070
City	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

TOWOOGLEH Registered Agent's Signature (REQUIRED) AUG 29 AH IO: (CONTINUED)

ARTICLE IV-

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The name and address of each person authorized to manage and control the Limited Liability Company:

Name and Address:
Howard D. Belote 139 Ocean View Dr Tavernier FL 33070
2023 AUG

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Howard D. Belote

Typed or printed name of signee <u>Filing Fees</u> \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)